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Bib Data Sheet

CONFIRMATION NO. 2410

|  |   |  |                         |  |
|--|---|--|-------------------------|--|
| SERIAL NUMBER<br>10/049,891  | FILING DATE<br>07/08/2002<br>RULE   | CLASS<br>604   | GROUP ART UNIT<br>3761  | ATTORNEY<br>DOCKET NO.<br>KCC 4814 (KC<br>#15,978) |
| <b>APPLICANTS</b>  |   |  |                         |  |
| Maria Raidel, Nurnberg, GERMANY;<br>Franz Aschenbrenner, Kastl, GERMANY;<br>Jan Ullman, Nurnberg, GERMANY;                       |   |  |                         |  |
| ** CONTINUING DATA *****<br>This application is a 371 of PCT/EP00/07836 08/11/2000   |   |  |                         |  |
| ** FOREIGN APPLICATIONS *****<br>GERMANY 199 38 437.1 08/13/1999   |   |  |                         |  |
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met  | <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after | STATE OR<br>COUNTRY<br>GERMANY   | SHEETS<br>DRAWING<br>10 | TOTAL<br>CLAIMS<br>38                              |
| Verified and<br>Acknowledged<br>Examiner's Signature<br><i>L. Miller</i>   | Initials<br><i>LX</i>   |  |                         | INDEPENDENT<br>CLAIMS<br>2                         |
| <b>ADDRESS</b><br>000321<br>SENNIGER POWERS LEAVITT AND ROEDEL<br>ONE METROPOLITAN SQUARE<br>16TH FLOOR<br>ST LOUIS, MO<br>63102 |   |  |                         |  |
| <b>TITLE</b><br>Absorbent body for an absorbent product and methods of producing an absorbent body                               |   |  |                         |  |
| FILING FEE<br>RECEIVED<br>1344   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following:   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue ) |                         |  |

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| <input type="checkbox"/> | Other  |
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